

FILED

JANUARY 8, 2007

**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE
SUSPENSION OR REVOCATION OF
THE LICENSE OF

DARREN JAMES, D.P.M.

TO PRACTICE PODIATRY
IN THE STATE OF NEW JERSEY

Administrative Action

**ORDER OF REINSTATEMENT OF
LIMITED LICENSURE**

This matter was opened to the Board by respondent's January 20, 2005 Petition for Reinstatement of his license to practice podiatric medicine in New Jersey. By way of background, respondent's license to practice was revoked effective April 26, 2000 following his conviction in both Federal and State Court for Medicaid fraud. The Order of Revocation provided that respondent could reapply for licensure after two years, but that no credit would be provided towards the two year period were respondent to practice podiatry in any other jurisdiction. The Order also provided that he complete community service in a non-podiatric setting and pay certain costs and fees and complete a Board approved ethics course.

Respondent initially applied for reinstatement in March 2003 but was denied as the Board concluded that he had practiced podiatry in New York since at least January 2001 and therefore at least fifteen of the twenty-four month period of time before which he could reapply should be considered tolled. Further, the Board

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found that respondent did not truthfully answer the biennial renewal in September 1999 regarding his licensure in other states. Further, he had not then satisfied the community service requirements. Finally, the Board was convinced that respondent had not maintained current clinical competency. An Order filed June 20, 2003 memorialized the Board's denial.

He appeared pro se before a Committee of the Board on May 25, 2005 to discuss his most recent petition for reinstatement. Respondent testified that he made a major mistake - expressed remorse for his prior criminal acts and demonstrated satisfaction of the requirements of reinstatement involving community service and a minimum of two years of no podiatric practice.

Additionally, respondent, at the Board's suggestion, submitted to a practice assessment by the New York College of Podiatric Medicine and has agreed to a reinstatement with limitations and a program of remediation outlined herein.

IT IS THEREFORE on this 4TH day of JANUARY , 2007

ORDERED that:

1. Respondent's license to practice podiatric medicine in New Jersey is hereby reinstated with limitations.
2. Respondent shall fully and successfully participate in a remedial education program conducted by the New York College of Podiatric Medicine ("the Program") as follows:

(a) Respondent shall provide to the Program

representative a minimum of twenty (20) podiatric cases of his at least quarterly but no more frequently than monthly for evaluation. The list of cases for review shall be provided as soon as Respondent has performed the minimum 20 cases in the areas delineated herein. The cases shall be relevant to the areas of internal medicine, pathology, dermatology, musculoskeletal pathology, infectious disease, and surgical decision making/practice and shall be diverse in nature.

(b) Respondent shall select the cases based on relevance to particular subject matter if so directed by the Program and shall submit a brief synopsis (approximately 25 words) of each case. Duplicate case submissions will not be considered as satisfactory compliance with the Program.

(c) The Program representative shall then select five (5) of respondent's 20 cases for detailed review. Respondent shall timely submit to the Program representative the treatment notes, laboratory reports, and copies of radiographs which support the assessment and management of the 5 cases selected by the Program representative for detailed review.

(d) Initially, Respondent shall ensure that the Program is in receipt of the 20 cases (with synopsis) as soon as he has performed sufficient cases in the representative areas to meet the 20 case requirement. If Respondent's volume of cases increases to the point where the 20 case quota is met monthly, then he shall

submit the cases and synopsis by the 15th of the month in which the review is scheduled. Said case submission and review shall continue until the Program representative and the Director of Medical Education determine and memorialize in writing to the Board that further remediation of this nature should cease.

(e) Respondent shall ensure that personal health care identifying information as per HIPAA is redacted from all submissions to the Program.

(f) Respondent shall cooperate fully with the Director of Medical Education of the Board and with the Program representative in the completion of additional educational tasks not limited to the content of the cases, the need for respondent to engage in further study, relevant literature review and case discussion. Respondent shall satisfactorily complete all educational assignments assigned to him by the Program.

3. Respondent shall submit a \$250.00 certified check to the Program by the 15th day of the month along with the submission of the 20 case list and synopsis for Program review.

4. Respondent shall ensure that the Program reports to the Director of Medical Education of the Board at least quarterly during this period of case review regarding Respondent's participation and progress. If in the discretion of the Program or the Director of Medical Education of the Board the submissions are considered inadequate, Respondent shall comply with additional

requests for case review.

5. Respondent may include in his podiatric practice those invasive procedures generally considered to be the non surgical practice of podiatry.¹ These procedures are enumerated below and shall not require the use of any anesthetic other than local.

toenail procedures

incision and drainage of abscess

treatment of ulcers

removal of skin lesions

injections for diagnostic or therapeutic purposes

6. Respondent shall currently be prohibited from performing any deeper soft tissue or any osseous surgical procedures or procedures generally considered the surgical practice of podiatry.²

7. Respondent may commence performing deeper soft tissue and osseous surgical procedures of the digits at such time as the Director of Medical Education of the Board provides written notification to the Board, Respondent and the Program that respondent's remedial education program is satisfactorily progressing and has reached a stage whereby he may commence a

¹ The insurance industry requirement to bill for generally accepted non surgical podiatric procedures with surgical codes will not change the meaning of this paragraph.

² Non surgical podiatric practice and surgical podiatric practice are defined using PICA podiatric malpractice insurance restrictions along with the agreement of the Program.

limited surgical practice with the following conditions;

(a) Respondent's surgical practice ~~is~~ is limited solely to directly observed procedures as defined herein by a Board pre-approved surgical preceptor at a licensed facility.

(b) Respondent shall ensure that his surgical preceptor be pre-approved by the Director of Medical Education of the Board and sign a copy of this Order and respondent shall provide the signed Order to the Director of Medical Education of the Board.

(c) Respondent shall ensure that the preceptor directly observes all surgical procedures until respondent has demonstrated to the satisfaction of the preceptor, Program and Director of Medical Education of the Board that he is competent in soft tissue and osseous surgery of the digits.

(d) Respondent shall satisfactorily complete all educational assignments regarding current podiatric surgical practices assigned to ~~him~~ by the surgical preceptor.

(e) Respondent shall ensure that the surgical preceptor reports to the Director of Medical Education of the Board monthly during this period of direct surgical observation. Such reports should include the number and nature of cases observed and comments regarding all aspects of surgical judgement, skill and management observed. The reports should also comment on Respondent's compliance with successful completion of educational

assignments that may be required by the surgical preceptor.

(f) Respondent, at the time he submits an application for privileges at a licensed facility to perform surgical procedures shall provide a copy of this Order of Limited Licensure.

(g) Respondent shall be prohibited from performing any metatarsal region surgical procedures (including preceptor observed) until he has received *written notification from the* Director of Medical Education of the Board that he may commence *performance of these procedures,*

(h) Respondent shall *ensure that the preceptor* directly observes *all surgical procedures until respondent has* demonstrated to the *satisfaction of the preceptor,* Program and Director of Medical Education of the Board that he is competent in metatarsal region surgical procedures.

7. Respondent shall satisfactorily complete any *further podiatric educational* experiences identified during the remedial program, as necessary to address any deficiencies *observed* by the Director of Medical Education of the Board, the Program or the surgical preceptor.

8. Respondent's limited surgical privileges shall continue to be directly observed until such time as respondent, the Program and the surgical preceptor receive written notice from the Director of Medical Education of the Board that direct

observation may cease.

9. Respondent shall ensure that MD, DO or DPM representative of the licensed facility where respondent holds surgical privileges shall report biannually to the Director of Medical Education of the Board for the one year following cessation of direct observation. This reporting to include number of cases, technical quality of work including surgical judgement and complications encountered if any.

10. Respondent is prohibited from engaging in surgery of the mid-foot, tarsus or ankle.

11. The educational plan and surgical monitoring (if respondent elects to engage in the surgical practice of podiatry) is mandatory as a condition of limited license reinstatement and respondent shall timely bear the costs of the program.

12. Respondent shall, within six months, of reinstatement of limited licensure successfully complete at his own expense a course in podiatric billing and coding which is pre-approved by the Director of Medical Education of the Board and shall timely supply evidence of successful completion to the Director of Medical Education of the Board.

13. Any violation of any terms of this agreement is grounds for the automatic suspension of respondent's license. Upon five (5) days notice respondent may request a hearing limited to the issue of violation of the Order.

14. Respondent may petition *the* Board *for* modification of this Order upon demonstration of successful completion of the Program, surgical preceptorship for soft tissue and osseous surgery of digits as well as metatarsal region and subsequent *one* (1) year *of reporting*, providing he has the support of the Director of Medical Education.

STATE BOARD OF MEDICAL EXAMINERS

Sindy M. Paul, MD, MPH

By: _____
Sindy Paul, M.D.
Board President

I have read the within Order and understand it. I agree to be bound by its terms and hereby consent to it being entered by the New Jersey State Board of Medical Examiners.

Barren James 12/22/06
Barren James, M.D.

Preceptor

To be signed and provided to the Director of Medical Education of the Board at the time of respondent's commencement of limited surgical privileges.